

Management Response and Recommendations Action Plan

Evaluation Report Title: Final evaluation report: Strengthening Sightsavers reach and impact in West Africa

Date of Response: 05/02/16

This management response was compiled by the Irish Aid Programme Management Committee. The actions agreed in the plan below are assigned to those with relevant responsibility in the organisation. Progress against this plan will be monitored by the Programme Management Committee, who will report to the Programme Board on its implementation.

1. Overall Response

The Irish Aid grant “*Strengthening Sightsavers reach and impact in West Africa*” aims to improve access to health, education and social inclusion for women, men and children living in Cameroon, Guinea Conakry, Liberia, Mali, Senegal and Sierra Leone. In addition to specific sectoral objectives in these countries, a complementary development education objective and a wider public engagement programme was established for Sightsavers Ireland along with an objective to increase the capacity of Sightsavers’ staff and partner organisations based in the target countries to deliver quality programmes. Following the Ebola outbreak, a further objective was added which focused on contributing to the post Ebola recovery in Liberia, Sierra Leone and Guinea Conakry.

In August 2015, a final evaluation was commissioned to assess the achievements from the first four years (2012-2015) of the five year programme. This performance evaluation covered all in-country programme activities that were supported in part or fully by the Irish Aid programme grant. Visits were made by evaluation team members to four of the six targeted West African countries and to Ireland to examine a cross section of thematic activities. Additional information was collected and triangulated from reports, reviews and conversations with a range of stakeholders. A survey in Mali captured the views of 250 health care clients on the impact of the programme.

The review confirms that the Sightsavers programmes, benefitting from Irish Aid funding, have responded to real needs in some of the poorest countries in the world in the areas of eye health and neglected tropical diseases (NTDs) control/elimination, inclusive education and social inclusion. These are significant achievements, especially given the disruption to progress caused by Ebola in the three Mano River Union countries and difficult security challenges in West Africa in general. We agree with the review’s comments that overall performance has generally been on track acknowledging the differing and, in some cases, difficult operating environments. We also appreciate the recognition of the excellent rating for the relevance of the programme across all thematic areas in all countries.

Sightsavers acknowledges the report’s findings and recommendations and will use these to guide future work in the West African region and beyond. In addition to the specific formal recommendations, to which we respond in the action plan below, we also include our responses to the findings which sat outside the formal evaluation recommendations.

2. Findings we concur with

We concur with the report on the point that since the mid-term review, Sightsavers has introduced a number of new initiatives for **monitoring and supporting service quality** and we are maintaining this focus. Sightsavers will continue to improve its programmes through our Quality Standards Initiative. We will integrate quality standard assessment scores and action plans into our online data collection Programme Portal. We will build on the successful transition to quarterly output reporting by integrating our narrative reporting into the Portal. We are glad that the review acknowledged that data quality and verification processes and the Portal are greatly improving the accuracy and promptness of partner reporting and that these initiatives were greatly appreciated by country offices for improving the efficiency of output monitoring.

Given the importance of measuring success against **outcomes** for Irish Aid, and following actions taken since the mid-term review, we welcome the review's recognition of our organisation-wide reflection on the measurement of outcomes and impact and the clarifications and improvements that have been introduced. We have strengthened monitoring and evaluation (M&E) technical support for the West Africa Region through the appointment of a dedicated M&E officer. Additionally, the Irish Aid Programme Board and Programme Management Committee, established in August 2015 to strengthen the accountability of Sightsavers Ireland to Irish Aid for implementation of the Programme Grant, have increased scrutiny of the programme grant, with an express purpose that its' outcomes and impact are reflected in the evaluation and reporting of the programme. Other examples of our increased emphasis on outcomes include the fact that social inclusion and inclusive education programmes leads are revising logframes to be more outcome focused and Country Offices now have an increased focus on outcome reporting.

The evaluators' findings, conclusions and recommendations acknowledge the progress made in relation to the longer-term strategic objective on **eye health** and in many cases, these are reported to be achieving excellent results so far. It also acknowledges the potential to continue to move towards sustainable, replicable and inclusive eye health systems in future phases. According to the report, with its effective partnership model and networks, Sightsavers is in a strong position to deliver on this potential. The report demonstrates that in the countries visited and to a degree in other countries, eye health is integrated into the health systems to some extent and that Sightsavers has made positive contributions to this dynamic through its health systems strengthening work. The post-Ebola work in Sierra Leone in particular is a good example of health system integration.

The review confirms that our work on **NTDs** mostly achieved the target results, generally with excellent coverage. However, we agree with the reviews' comment that further investment in surveillance work and community-level awareness and prevention strategies will continue to be required to ensure that the excellent progress towards control and elimination are maintained.

We are delighted that the review recognises the notable progress we have made in the social inclusion and inclusive education programmes during the last couple of years and the fact that they are now more focused, have a better sense of direction and fit with sectoral good practice. Our focus now is for these pilot projects to be scaled up. However, we agree with the review that more time is needed to see these pilots translate into scale up by governments: we are already seeing promising opportunities in Senegal and Cameroon.

We appreciate the review's recognition of Sightsavers' high efficiency in the use of resources and our local partners' appreciation of the financial and administrative **capacity-building** and on-going support they received.

In terms of **Ebola**, we agree with the review that following our country level projects for the diagnosis and treatment of uveitis and other eye conditions of survivors, there is a significant opportunity for Sightsavers to link social inclusion and eye health through supporting Ebola survivors' groups.

3. Findings we question

*"In the absence of **country level strategic plans**, it is apparent (and important) that country programmes are taking into account differing operating contexts and histories when designing country level programmes aligned with Sightsavers' global organisational strategies and its Strategic Thematic approach; concise documentation of this would assist external stakeholders in the rationale for how organisational policies have been translated into practice and in managing their expectations". (Page 56)*

Context analysis is already included within programme documentation, but we agree that for future programmes, it would be useful to include within the programme documentation how specific programmes relate to and were informed by the relevant organisational **thematic strategies**.

*"It may be useful for Sightsavers to have a greater understanding of **humanitarian emergency** environments and dynamics. This would lead to improved scenario planning and identification of appropriate strategies responding to a situation whilst respecting Sightsavers mandate and programme strategies. It may also be useful for Sightsavers to consider whether current Country Office's staffing levels are appropriate in environments where civil society partners are weak and probably require longer term accompaniment". (Page 57)*

On the first issue, over the past two years we have significantly improved our **security systems and resilience** to allow us to make swift decisions on emergency and chronic humanitarian situations in terms of partner, staff, beneficiary and programme safety. Our response to the **Ebola** situation was a good example of that, where we worked closely with the Ministries of Health to make appropriate and fast programme decisions and rapidly concluded that continuing non-urgent and non-essential eye health programmes during the outbreak would put staff, partner staff and patients at unnecessary risk. Beyond that, the evaluation has detailed some of our other responses, working with partners. The Presidential award received by Sightsavers in Sierra Leone, for our work during the Ebola crisis, is good evidence that the organisation is perceived to have acted professionally and appropriately for a non-humanitarian agency. We do not intend to increase our expertise in humanitarian relief as to do that properly would be a significant addition to our mission, and that is not a direction the organisation wishes to explore mid-strategy period.

With regard to the second point on staffing levels, our staffing model is flexible and combines a core understanding of what is required to staff an office and add value to the development context in our sectors of experience. Our staffing decisions also take the project and partnership resources required for the portfolio of programmes into account. All decisions around staffing needs for each country office are made between the Country Director, Regional Director and the relevant Programme Directors.

‘Technical support lines are inevitably vertical and thematic and miss opportunities to synergise overall programme implementation. Large regional Sightsavers programmes similar to the Irish Aid financed West Africa programme are managed by a dedicated Programme Manager. Future phases of this programme would also benefit from the budgeting and inclusion of a similar post’. (Page 45)

This is a valid question to raise, however Sightsavers does not believe the recruitment of a Programme Manager is warranted in the West African context. Country Directors report to the Regional Director who has overall line management responsibility for delivery. Regional M & E has also been strengthened with the appointment of an Irish Aid M&E Officer. We believe that recruiting a Programme Manager would lead to duplication and confusion of roles and would not respect our **value for money** principle of finding the most cost-effective option in our operations. Where we have recruited Programme Managers in the past for multi-country programmes, it has usually been because we have not had office infrastructure in all of the countries involved in the programme.

*‘Where Irish Aid funding was accompanying Sightsavers unrestricted funding, there was rarely any **demarcation** (except by finance staff) and discussion about what may have happened without Irish Aid funding. In future phases, it would be easier to identify the Irish Aid contribution to impact if there was greater involvement of Country Offices and regional participation in Irish Aid allocation processes’. (Page 58)*

Country Offices are at the core of the annual planning and resource allocation process. They submit their financial plans for the following year based on careful planning with partners. Project planning looks at activities, procurement and budgets for the following year. This detailed planning work by Country Offices is at the core of the resource allocation process. So we do not agree that this is the cause of any inability to attribute impact. However, as noted elsewhere, we will be taking a different approach to the structure of any future programme grant supported by Irish Aid. Another approach which could have been taken by the evaluation team would have been to look at the difference in the programmes in the supported countries both before and during the Irish Aid funding period, where they would have seen considerable expansion in most programme areas. We are clear within Sightsavers that this growth in programmes is a direct impact of that support.

‘In the countries visited the evaluators observed that Sightsavers does not necessarily fund, although it works closely with disabled persons’ organisations (DPOs) and federations. These unions/federations are important players in the Convention on the Rights of Persons with Disabilities (UNCRPD) influencing agenda. A recommendation of this evaluation is thus that Sightsavers Country Offices review and diversifies partner portfolios, and as circumstances allow increases its level of on- granting to strategically important disability organisations, as well as allocate additional social inclusion funding for capacity building and more comprehensive public information and awareness campaigns. (Page 56)

One of Sightsavers’ priorities is **onward granting and capacity building of southern partners**. We already work extensively with DPOs in all of our projects globally and DPOs are the principal partners in our social inclusion and inclusive education projects in West Africa. Some examples of the DPOs we work with include; CAUSE & FESAPH in Senegal, UMAV & FEMAPH in Mali, ANAC & Platform in Cameroon, NUOD in Liberia and SLAB & SLUDI in

Sierra Leone. Our social inclusion portfolio is particularly rich and diverse in West Africa and we have a diverse range of projects focusing on community based rehabilitation (CBR), employment, disability rights advocacy, community development, inclusive elections, access to education and health services. Where we have capacities that we can share and use to support DPOs to become stronger and more independent organisations, we do this. But it is important that this is done in recognition that DPOs are a diverse group and our ability to support needs to reflect that.

In terms of funding more awareness raising campaigns, we agree this is important and we already fund a great deal of these such as the Marrakesh Treaty campaign in Senegal and Ghana; the International Forum of International non-governmental organisations (FONGIM)– Civil Society Organisations (CSO) federation which includes the DPO federation in Mali and Disability alliance groups in Liberia and Sierra Leone. In each country, we have also supported campaigns on the UNCRPD along with regular refresher sessions on the Convention.

If circumstances allow, we hope to increase our support to DPOs in the coming years in West Africa.

Recommendations Action Plan

Evaluation Recommendations (A)		Accepted/ Rejected (B)	Priority High/ Med/ Low (C)	If “Accepted”, Action plan for Implementation or if “Rejected”, Reason for Rejection (D)	Responsibility (E)	Timeline (F)
1	Broaden the strategic scope of system strengthening to enable Sightsavers identify niche areas within the broader programmes of health, education and social welfare support funded by multilateral agencies (UNICEF, WHO, World Bank, AfDB etc). This will promote the profile, engagement and influence of Sightsavers within mainstream ministries beyond specific eye health and NTD related departments as well as with large scale development actors. (Crosscutting).	Partially accepted	Low	<p>We are already doing this through supporting the thematic areas of our expertise: eye health and NTDs within the health system, and education and social inclusion more broadly. We focus our country-specific advocacy, capacity and programme work on our partnerships with national governments and civil society organisations as in our Theory of Change, these are the most important development actors within countries.</p> <p>It is the ministry programmes and plans which are largely funded by the multilateral agencies mentioned and, therefore, we are already in a sense working in partnership with these agencies to support the government’s strategies in these critical policy areas. The question is whether the best way to support, for example, the development of eye health within the healthcare system is to work within a multilateral funded health programme which does not currently provide eye health and try to expand it; or to develop the eye health programme with the ministry, show the impact it can have and ensure it is in the ministry’s general health programme that requires multilateral funding in future. This tends to be our main approach in both health and social inclusion.</p> <p>However, we accept the recommendation in the sense that we recognise the need to improve our relationships with these other actors in the health, education and broader development sectors in country, as we already have developed relationships with these agencies and others at the international level. The Sustainable Development Goals (SDGs) offer a good opportunity to do this, with targets and indicators in universality, universal health coverage, disability and NTDs, which these agencies have largely endorsed.</p>	Dominic Haslam, Director of Policy and Programme Strategy	Ongoing
2	The ongoing work maintaining and reviewing the central	Accepted	Med	Sightsavers has already reviewed its’ procurement training needs across the organisation and has put the necessary resources and processes in place to support country offices. Activities around this	Ken Moon, Director of Finance &	Ongoing

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procurement system should review training needs and the need to strengthen communications between the central system and country offices, and between country offices and partners. (Objective 1 – Effectiveness and Efficiency).			<p>that we have completed so far include; training relevant Country Office staff in Proactis (the central procurement system) and the standard procurement list; ongoing support when required and one-to-one training with Regional Offices.</p> <p>Based on our ongoing internal review of our central procurement system, other plans around increasing capacity in procurement and strengthening communications between all levels include;</p> <ul style="list-style-type: none"> • Developing a follow-up plan to ensure the appropriate amount of support is provided; • Keeping records which contain up-to-date information on who has been trained and when; • Plans to deliver Standard Procurement List training to Country Offices in April 2016 (to capture new starters & refresher training); • Direct one-on-one procurement training in French provided for countries with lower procurement capacity, or where language can be a barrier, for example Mali; • Support from Global Technical leads on technical matters relating to procurement of eye health consumables or clinical equipment to ensure that consumables ordered are in line with good practice and clinical guidelines; • A revision, simplification and translation of procurement guidelines (into French) to take into account technical guidelines and feedback from Country Offices. This will be available by March 2016 <p>One final lesson learnt is that central procurement is not always the appropriate approach and we are open to considering local procurement if the context, the type of goods required, the availability of local quality certifications and practicalities means that good quality consumables are guaranteed at a good price within the timeframes identified. All procurement requests will be dealt with on a case-by-</p>	Performance	

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				case basis.		
3	<p>For further promoting the sustainability of Sightsavers and donor investments, exit strategies for eye health programmes should include training in relevant aspects of inventory management and procurement and should embed good local procurement systems and practices well in advance of the standard 8 months project close-out process. Without this, other achievements in health system strengthening would risk being undermined (by ruptures in supply and/or poor quality products). (Objective 1 - Sustainability).</p>	Partially accepted	High	<p>We accept that the principle is correct and it is part of the process of health systems strengthening. However, we only partially accept this as a recommendation because in principle we already do exactly this but with varied success. Partners’ capacity to maintain their robust procurement and inventory management system is not dependent on Sightsavers providing the technical support alone. What is also crucial is the responsiveness of the particular partner to the process, which often requires them to make substantial changes to their policies and procedures or allow parallel policies and procedures. This is particularly so with issues such as procurement which require the partner to invest in resources, and/ or allow ophthalmic staff or eye unit managers access to manage resources and make decisions at their level.</p> <p>One lesson we take away from recent evaluations and exits is that it is crucial to build the exit plan into the project at the planning phase and emphasise it at the inception phase ensuring a commitment to the process which may provide more leverage to allow it to succeed.</p> <p>Action plan: i) We will ensure that new projects include details of the exit phase within the project document and that it is signed by the partner. We will do this even when we do not expect that exit phase to be within that cycle of the project – but ensure that we have a projected timeline for such an exit phase. The new project planning templates provide a section for this purpose and this will be strengthened ii) As older projects draw to an end of the cycle, we will carry out a similar exercise and include signed project plans for the next cycle of support iii) We will improve on the training and capacity of our project staff in providing this support to their projects. A draft of the new procedures was discussed in early January 2016.</p>	Country Directors, Regional Directors and Global technical leads	July 2016

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				The development of exit phase documentation is in progress. We expect the guidelines document to be completed, approved and implemented in 2016.		
4	Recognising Sightsavers' existing good practice of providing external francophone stakeholders (partners and other agencies) with key policy and strategy documents in French language, this should be completed for all financial, administrative and procurement guidance and related templates that partners are expected to use. (Crosscutting).	Accepted	Med	<p>In 2013, Sightsavers made a commitment to ensure all key documents were translated and available in French. The following key policy documents are available in French:</p> <ul style="list-style-type: none"> • Strategy, implementation and monitoring card (SIM card) • Project Implementation manual (PIM) launched in 2014 • Thematic strategies launched since 2013 • Programme Portal guidelines (with francophone portal training held in January 2015) • Partnership policy and relevant tools • Reporting templates • Quality Standards (QSAT) • Revised procurement guidelines (March 2016) • Induction e- learning platform (once completed) <p>It is important to add that 18 Programme and Finance staff based in Francophone West African countries have completed intensive English language training in the neighbouring Anglophone Gambia. The course is aimed at professionals and covers all aspects of the language grammar, conversation etc.). In addition, several members of the global teams that support the programme are bilingual in French and English, they are present at key events and workshops held for the Irish Aid programme and they ensure that such events are facilitated in both French and English. They are also available to support staff from Senegal, Mali and Guinea in any language- related operational issues.</p>	Bakary Marong, Regional Director for West Africa	Ongoing
5	In line with integrated education and social inclusion strategies, the	Partially accepted	High	Staff will always need to be trained, because methods, concepts and good practices are in constant evolution in innovative sectors such as inclusive education and social inclusion. In June 2015, staff in the six	Bakary Marong, Regional	The whole of 2016,

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<p>inclusive education and social inclusion programme staffing levels should be reviewed to ensure that there is adequate capacity for the increased partner accompaniment needed and to take advantage of the significant opportunities that are emerging. (Objectives 2 and 3).</p>			<p>Irish Aid countries attended a week-long theoretical and practical training in Dakar in inclusive education and social inclusion which involved field visits, experience sharing and learning tools. The objective of this training was to provide West Africa staff with a better understanding of the new organisational strategies and approaches, which had been developed with significant input from programme and other staff. Knowledge gained from this training assisted various countries to develop concept notes on social inclusion for example and countries which implement education projects were able to learn the inclusive model. Staff have access to ongoing coaching in these thematic areas from the Regional Technical Lead either in situ or by Skype. Knowledge gained from this training now needs to be put into practice (and measured by M&E tools) with a view to designing further training based on a learning needs assessment.</p> <p>It is true to say that staff should ideally have a strong background in inclusive education and social inclusion so that they are able to better represent Sightsavers in technical working groups as well as guide project implementation. However, it has proved challenging to recruit staff in the region with the necessary project management and partnership skills, disability awareness <u>and</u> the relevant technical expertise. Efforts are being made to identify new staff with developed technical backgrounds in inclusive education and social inclusion (e.g. Cameroon Programme Officer). Also, in order to address this gap, Sightsavers recruited a technical expert in inclusive education and social inclusion specifically for the region. Specialist technical expertise is also being provided by external consultancies (e.g. in Cameroon: working with a specialist to define a strategic plan for the DPO federation; in Senegal: commissioning a teacher specialist in pedagogy to carry out monitoring work in schools; in Sierra Leone & Liberia: assigning a consultant to design the inclusive education policy; in Senegal & Mali: hiring researchers to help with the qualitative study...).</p>	<p>Director for West Africa</p>	<p>especially in Feb, April, June, Oct & Dec for RTL staff coaching + Q4 for WARO training.</p>

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				<p>Action plan; i) staff training workshop in inclusive education and social inclusion in 2016 (most probably using a cross-cutting thematic such as gender as a driver, and inviting health staff as well to create a regional dynamic) ii) Continuation of Regional Technical Lead support in the region, as well as support from the newly appointed M&E staff member iii) Consultancies secured for 2016 in inclusive education and social inclusion according to the needs (child protection, training modules, research...)</p> <p>Staffing levels have increased in the West African region since the beginning of the Irish Aid grant and Sightsavers considers these levels adequate for current programme needs. That said, staffing requirements are regularly reviewed within the region.</p>		
6	<p>Use the new programme portal, or similar monitoring tools, to track the key capacity building and inter-country learning being achieved through the activities and processes introduced to achieve Objective 4.</p> <p>Likewise, consider introducing assessment criteria for evaluating changes achieved in Country Office capacity, going beyond the PCM to include aspects such</p>	<p>Accepted</p> <p>Partially accepted</p>	<p>Med</p> <p>Med</p>	<ul style="list-style-type: none"> Phase 2.1 of the Portal will be rolled out at the beginning of Q2 2016 with a new functionality to create programme pages. We will set up a programme page for Irish Aid where reports on capacity building will be centrally stored. We will upload indicators from output 4a onto the Portal for quarterly reporting by Country Offices. <p>Action plan</p> <p>i) Finalise data collection log for output 4a ii) Communicate to Country Offices: data collection log holds all the information regarding the indicator definitions, formulas, frequency of collection, etc. (essentially the instructions on how to complete the indicator) iii) Create project pages and upload indicators, set to quarterly reporting.</p> <ul style="list-style-type: none"> Under the partnership policy Sightsavers has introduced a human resources standard into the QSAT Project Cycle Management (PCM) in Q3 2015. This has been piloted in India and Senegal in Q4 2015 and is being piloted in Zambia and Guinea Conakry in Q1 2016. We have received feedback from the Country Offices on these 	<p>Claire Walsh -Head of Programme Systems and Monitoring, Finance & Performance</p>	<p>As the Portal improvements will not be rolled out until the end of Q1 we will create the project / programme pages in Q2. We will work with the Country Offices over this time</p>

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as representation, leadership etc. (Objective 4).			<p>standards and will be working with the Finance and Programme Business Partner to finalise them by the roll out of the revised QSAT PCM in Q3 2016.</p> <ul style="list-style-type: none"> Sightsavers “partially accept” this recommendation because the standards will not track progress of an individual’s change in capacity (personnel records are confidential). Our draft standards currently focus on ensuring that staff training plans are in place, and that there is evidence of performance assessment, rather than going into the specific of aspects (such as representation and leadership). Of course these draft standards may change as a result of the pilot project. <p>Action plan: i) Consolidate feedback from pilot QSAT PCMs ii) Collaborate with Human Resources Business Partners to produce revisions iii) Second round of piloting in Q2, if necessary iv) finalisation and roll out with the scheduled QSAT PCM revisions by Q3 2016</p>		<p>period to set up the indicators</p> <p>QSAT PCM revisions are due for roll out in Q3 2015. We will work with relevant stakeholders to complete the work between Q1 – Q2</p>
<p>7 Sightsavers should explore further how it engages with thematic learning processes, both with country staff and key partners. A programme learning strategy and plan should be developed WARO (West Africa) focused on strategic thematic issues which would identify learning objectives and</p>	Partially accepted	High	<p>Awareness and competency building of our field staff and key partners around the thematic strategies is a key priority for Sightsavers. We have provided thematically focussed training over the past four years (<i>please see recommendation 5 above for some examples of this training</i>). But this is an area where we need to increase our focus and effort, for which a plan will be developed, and this is the reason that we have partially accepted this recommendation.</p> <p>Also, we do not feel that creating a fixed learning strategy for the region is the best way to respond to learning needs. Based on our experience within the region, we have been more successful when we have taken a more flexible approach which is responsive to staff, partners and context. The current focus on learning initiatives includes:</p>	Bakary Marong, Regional Director for West Africa	Ongoing

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	outline a multi-year programme of dedicated learning events and follow-up. (Objective 4).			<ul style="list-style-type: none"> Work to put the systems in place to facilitate the sharing of learning and good practice between global, regional, and country levels and ensuring that lessons learnt from all West Africa evaluations and other learning information, events and products are fed back into programme design; Developing a long-term plan for our social inclusion/education and eye health portfolios in West Africa. Learning needs will be identified as part of that process Individual staff members are identifying individual learning and development needs as part of performance review process (underway Q1 2016) 		
8	Develop the technical support model used in inclusive education and social inclusion and prioritise current plans to recruit a further WA eye care technical advisor for providing a similar responsive regional support for eye health care programme implementation. (Objective 4).	Accepted	High	The recruitment process is already underway and we are currently at the interview stage. The start date of the new staff member will depend on the availability of the successful candidate.	Kolawole Ogundimu, Senior global technical lead for eye health	June 2016
9	Clarify the role of the Sightsavers Ireland Programme Management and Oversight Committee in ensuring that appropriate evidencing of qualitative	Accepted	Med	The Irish Aid Programme Board and Programme Management Committee, established last August, are playing a leadership role in co-ordinating the resources of the organisation to plan, research, analyse trends and results, reflect, and document progress on Irish Aid supported programmes. This initiative is further strengthened by the appointment of a dedicated M&E officer in West Africa.	Michael Marren, CEO, Sightsavers Ireland	March 2016

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	change is available for reports to Irish Aid and other stakeholders. Generally, there needs to be greater emphasis on monitoring and documenting of outcome performance (Irish Aid feedback to consecutive Annual Reports, MTR).			She, together with the Grant Officer, will gather and document the appropriate evidence and case studies to demonstrate more clearly our outcome performance in annual reports. This will support internal management, communication and reporting, as recommended in the Mid Term Review. The collective effort from this initiative will be evident in our Annual Report for 2015.		
10	For any future grant phases, a dedicated (2-3 day) grant start-up workshop, involving relevant global staff and bringing together all the Irish Aid grant country programme and finance managers, should be held to ensure full understanding of the details of the grant-funding mechanisms and to agree at the outset common approaches for tracking the added value and specific impact of the grant on country programmes and related external indicators. (MTR, Objective 4).	Accepted	High	<p>Since the existing grant largely contributed to existing programmes and had been designed after thorough consultations in target countries, the start-up workshop was limited to Regional and Country Directors. Programme information was shared with programme staff, but we agree that a larger scale start up workshop could have been beneficial, with hindsight.</p> <p>Since the design of this programme, inception workshops are now mandatory for all new programmes within Sightsavers, so this recommendation has already been implemented.</p>	Anna Massey, Director of Institutional Funding	Implemented